

The trocar has an outer diameter of no greater than 13 gauge, preferably no greater than 13/14 gauge, and still more preferably no more than 15 gauge.

On page 13, please replace the paragraph starting on line 4 with the following:

In Figure 3, two antennas 16 are each deployed out of trocar distal end 14' and introduced into selected tissue mass 28. Antennas 16 form a plane and the area of ablation extends between the electromagnetic energy delivery surfaces of antennas 16. Trocar 14 can be introduced in an adjacent relationship to selected tissue mass 28. This particular deployment is useful for small selected tissue masses 28, or where piercing selected tissue mass 28 is not desirable. Trocar 14 can be rotated, with antennas 16 retracted in the lumen of trocar 14, and another ablation volume defined between the antennas 16 is created. Further, trocar 14 can be withdrawn from its initial position adjacent to selected tissue mass 28, repositioned to another position adjacent to selected tissue mass 28, and antennas 16 deployed to begin another ablation cycle. Any variety of different positionings may be utilized to create a desired ablation geometry for selected tissue mass of different geometries and sizes.

On page 13, please replace the paragraph starting on line 17 with the following:

In Figure 4, two antennas 16 are introduced into selected tissue mass 28. The effect is the creation of a substantially complete ablation volume formed between antennas 16 with a minimal central core that is not ablated.

In the Claims:

Please cancel claim 63.

Please amend claims 53, 56-60, and 64-66 as follows:

53. (Twice Amended) A method of volumetric ablation of tumorous tissue, comprising:

providing a tissue ablation apparatus comprising an elongated delivery device having a tissue piercing distal end and a proximal end, and at least one RF electrode